

**REQUEST FOR eGRANT ROLES
FOR MITIGATION APPLICATION DEVELOPMENT**

Submit to: Shawn Putnam
Mitigation Specialist
South Carolina Department of Natural Resources
Flood Mitigation Program
P.O. Box 167
Columbia, SC 29202.

Name: _____ Email: _____

Title: _____ Office Phone: _____

Government Entity: _____ Office Fax: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Signature of Individual Requesting eGrant Role(s)

Date Signed

ROLES REQUESTED

View/Print

Create/Edit

Sign/Submit

Flood Mitigation Assistance Program

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DESCRIPTION OF ROLES

- View/Print: This role is for review purposes only. This will usually include persons who do not need the authority to physically create or edit an application, nor the right to act as Applicant Agent and sign or submit the application.
- Create/Edit: This role allows an individual to create or edit applications. This person does not necessarily need to be intimately involved with the activity's development, but one able to function adequately on a computer. In addition, this individual would not normally act as Applicant Agent and sign or submit the application.
- Sign/Submit: This role is for the Applicant Agent or someone that has been given the authority to act in his/her stead. This role only allows for the signing of assurances, commitment of funds, and project submittal to the State.

AUTHORIZATION

The undersigned assures the above listed individual is authorized for the role(s) selected under the Flood Mitigation Assistance Program.

Typed Name of Authorized Representative/Applicant Agent

Title

Telephone Number

Signature of Authorized Representative/Applicant Agency

Date Signed